

County: Racine
OAK RIDGE CARE CENTER, INC.
1400 8TH AVENUE

Facility ID: 6610

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UNION GROVE 53182 Phone: (262) 878-2788
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 79
Total Licensed Bed Capacity (12/31/01): 79
Number of Residents on 12/31/01: 66

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 69

Corporation
Skilled
No
Yes
Yes
69

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		47.0
Supp. Home Care-Personal Care	No					1 - 4 Years		34.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.0	More Than 4 Years		18.2
Day Services	No	Mental Illness (Org./Psy)	21.2	65 - 74	6.1			-----
Respite Care	No	Mental Illness (Other)	3.0	75 - 84	33.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	36.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.0	95 & Over	21.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	18.2		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	22.7	65 & Over	97.0	-----		
Transportation	No	Cerebrovascular	12.1		-----	RNs		12.1
Referral Service	No	Diabetes	10.6	Sex	%	LPNs		4.5
Other Services	Yes	Respiratory	4.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	1.5	Male	25.8	Aides, & Orderlies		
Mentally Ill	No		-----	Female	74.2			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)					
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	
Skilled Care	6	100.0	289	35	85.4	115	0	0.0	0	12	63.2	155	0	0.0	0	0	0.0	0	53	80.3
Intermediate	---	---	---	6	14.6	96	0	0.0	0	7	36.8	155	0	0.0	0	0	0.0	0	13	19.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		41	100.0		0	0.0		19	100.0		0	0.0		0	0.0		66	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	10.6	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	15.2	53.0	31.8	66
Other Nursing Homes	7.7	Dressing	12.1	78.8	9.1	66
Acute Care Hospitals	76.0	Transferring	18.2	56.1	25.8	66
Psych. Hosp. -MR/DD Facilities	1.9	Toilet Use	10.6	74.2	15.2	66
Rehabilitation Hospitals	0.0	Eating	72.7	22.7	4.5	66
Other Locations	3.8	*****				
Total Number of Admissions	104	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.1	Receiving Respiratory Care		7.6
Private Home/No Home Health	5.6	Occ/Freq. Incontinent of Bladder	68.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	18.5	Occ/Freq. Incontinent of Bowel	43.9	Receiving Suctioning		0.0
Other Nursing Homes	2.8			Receiving Ostomy Care		1.5
Acute Care Hospitals	28.7	Mobility		Receiving Tube Feeding		1.5
Psych. Hosp. -MR/DD Facilities	0.9	Physically Restrained	7.6	Receiving Mechanically Altered Diets		15.2
Rehabilitation Hospitals	0.0					
Other Locations	3.7	Skin Care		Other Resident Characteristics		
Deaths	39.8	With Pressure Sores	6.1	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	108			Receiving Psychoactive Drugs		56.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	87.3	82.7	1.06	85.1	1.03	84.3	1.04	84.6	1.03
Current Residents from In-County	66.7	82.1	0.81	80.0	0.83	82.7	0.81	77.0	0.87
Admissions from In-County, Still Residing	27.9	18.6	1.50	20.9	1.33	21.6	1.29	20.8	1.34
Admissions/Average Daily Census	150.7	178.7	0.84	144.6	1.04	137.9	1.09	128.9	1.17
Discharges/Average Daily Census	156.5	179.9	0.87	144.8	1.08	139.0	1.13	130.0	1.20
Discharges To Private Residence/Average Daily Census	37.7	76.7	0.49	60.4	0.62	55.2	0.68	52.8	0.71
Residents Receiving Skilled Care	80.3	93.6	0.86	90.5	0.89	91.8	0.87	85.3	0.94
Residents Aged 65 and Older	97.0	93.4	1.04	94.7	1.02	92.5	1.05	87.5	1.11
Title 19 (Medicaid) Funded Residents	62.1	63.4	0.98	58.0	1.07	64.3	0.97	68.7	0.90
Private Pay Funded Residents	28.8	23.0	1.25	32.0	0.90	25.6	1.13	22.0	1.31
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	24.2	30.1	0.81	33.8	0.72	37.4	0.65	33.8	0.72
General Medical Service Residents	1.5	23.3	0.06	18.3	0.08	21.2	0.07	19.4	0.08
Impaired ADL (Mean)	46.4	48.6	0.95	48.1	0.96	49.6	0.93	49.3	0.94
Psychological Problems	56.1	50.3	1.12	51.0	1.10	54.1	1.04	51.9	1.08
Nursing Care Required (Mean)	4.0	6.2	0.64	6.0	0.66	6.5	0.61	7.3	0.54